



CONFIDENTIAL

LONDON DIOCESAN BOARD FOR SCHOOLS NON TEACHING STAFF APPLICATION

APPLICATION FORM FOR _____
(Post)

at _____ Voluntary Aided
(Name of School)

Church of England School in _____ Local Authority

Part A – 1. APPLICANT'S PERSONAL DETAILS

SURNAME:

TITLE (Mr, Mrs, Ms etc.)

FORNAMES:

PREVIOUS NAME(S) (if applicable):

PERMANENT ADDRESS:

TEMPORARY ADDRESS:

WORK TELEPHONE:

HOME TELEPHONE:

MOBILE NUMBER:

EMAIL:

Are there any restrictions on your being resident or being employed in the UK?

Yes

No

3. INSERVICE TRAINING/PROFESSIONAL DEVELOPMENT

LONG COURSES OVER 3 DAYS ATTENDED IN THE LAST 3 YEARS

NAME OF COURSE	ORGANISING BODY	FROM	TO

SHORT COURSES (1-2 days) ATTENDED IN THE LAST 3 YEARS

NAME OF COURSE	ORGANISING BODY	FROM	TO

4. CURRENT EMPLOYMENT

Present Post:

Responsibilities:

Date appointed:

Name of Employer:
(e.g. Governors, LA, Agency)*(If applicable)*

School:

Local Authority:

No. on Roll:

Address:

5. OTHER POSTS

NAME OF ORGANISATION	JOB TITLE AND RESPONSIBILITIES	FROM	TO

6. CURRENT SALARY

BASIC ANNUAL SALARY (please indicate spine point):

ADDITIONS (please give allowances, London weighting etc.):

TOTAL SALARY:

7. SUPPORTING STATEMENT

Your application should be supported by a letter of not more than 3 sides of A4 (12pt), addressing the criteria in the person specification for this post.

8. PROFESSIONAL REFERENCES

Please give the names of two referees who can vouch for your professional work, one of whom should be your present Headteacher if you are working in a school.

i) Name:

Position:

Address:

Telephone number:

Email address (where possible):

ii) Name:

Position:

Address:

Telephone number:

Email address (where possible):

Part B – CONFIDENTIAL INFORMATION

This section of the form will be removed before shortlisting.

1. Gender:

2. Date of Birth:

3. Cultural/ethnic origin:

4. Medical History

a) Do you have any disability as defined by DDA which would have an adverse effect on your ability to carry out normal day to day duties? Yes No

Registration number if registered disabled: _____

b) If the answer above is yes please give details and say what adjustments would need to be made to enable you to fulfill the job description.

5. a) Give details of any serious illnesses or operations that you have had.

b) Do you suffer from any recurring illnesses? Yes No
Please give details:

c) How many days of sick leave have you had in the last 2 years: _____
If more than 5 days in a year please give details:

(If necessary please continue on a separate page)

6. Ethnicity form:

Chose one section from A-E and then tick the appropriate box to indicate your cultural background.

A White

- British
- English
- Scottish
- Welsh
- Other, please write in _____
- Irish
- Any other White background, please write in _____

B Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed background, please write in _____

C Asian, Asian British, Asian English, Asian Scottish, or Asian Welsh

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background, please write in _____

D Black, Black British, Black English, Black Scottish, or Black Welsh

- Caribbean
- African
- Any other Black background, please write in _____

E Chinese, Chinese British, Chinese English, Chinese Scottish, Chinese Welsh, or other ethnic group

- Chinese
- Any other background, please write in _____

7. Criminal History

The position you are applying involves contact with children and is exempt from the Rehabilitation of Offenders Act 1974 and all subsequent amendments (England and Wales). For this position you are not entitled to withhold information about police cautions, "bind-overs", or any criminal convictions including any that would otherwise be considered "spent" under the Act.

Have you ever been convicted of any offence or "bound-over" or given a caution? Yes
 No

If yes, please give details on a separate sheet and attach it to this form in a sealed envelope marked "Confidential Disclosure".

I understand that if my application is successful I will be required to obtain a CRB Disclosure at the appropriate level.

8. Work Status

I understand that under the terms of the Asylum and Immigration Act 1996 should I be short-listed for the post for which I am applying, I will provide for the governing body, as employer, an original document* showing my entitlement to work in this country.

*Acceptable documents include your National Insurance card, a birth certificate issued in the UK or Eire, a P45 from your previous employer, a valid passport, or any relevant authorisation allowing you to work in this country.

9. Other information

Are you related to any member of the governing body, LA elected member, senior LA official or officer of LDBS?

Yes No

If yes, please give details:

You are reminded that any canvassing, direct or indirect, will disqualify candidates.

Successful candidates may be required to produce their birth certificate and original proof of qualifications and undergo medical examination.

Declaration

To the best of my knowledge the information on this form is correct.

I am in possession of certificates, which I claim to hold.

I understand that willful falsification or omissions may, if I am appointed, result in my dismissal.

I declare that I am not on List 99 or disqualified from working with children.

I am not subject to any sanction imposed by the General Teaching Council.

I consent to the processing of personal data as defined in the Data Protection Act 1998.

Signature _____

Date _____